IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF SOUTH CAROLINA

CARMONIA INFINITIUM PRIVAT REVOCABLE TRUST AC BENJE LC BENJE Sode T. Carmona TRUSTEE

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Sambom Charleston Burrowers Sam Dom Charleston Eausty Meller Williams Prealty

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Complaint for a Civil Case

Case No. 24-cv-4908-DCN-MGB (to be filled in by the Clerk's Office)

Jury Trial:

□ Yes □ No

(check one)

2024 SEP -9 PH 2: 29

I. The Parties to This Complaint

A. The Plaintiff(s

B.

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed. CARMONA INFINITUM PRIVATE						
Name Sadot Chambro TRUSTEF.						
Street Address C/o 4445 Clarwood Drive						
City and County Ladson, South Caroling Prepublic						
State and Zip Code I 29456-60007						
Telephone Number 843 278 - 4020						
The Defendant(s)						
Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.						
Defendant No. 1 Name						
Name Sam Dom Kgluing						
Job or Title						
(if known)						
Street Address D8 meeting St						
City and County West Columbia 50 29169						
State and Zip Code						
Telephone Number						
Defendant No. 2						
Name Leller Williams Practy Fro.						
Job or Title						
(if known) 503 Wando Park Blud.						
Street Address <u>Suite</u> 130						
City and County <u>FIA Pleasent 50 29464</u>						
State and Zip Code						
Telephone Number 843 416-2000						
Defendant No. 3						
Name						

II.

À.

B. If the Basis for Jurisdiction Is Diversity of Citizenship

The Plaintiff(s)					
a.	If the plaintiff is an individual				
	The plaintiff, (name)the State of (name)				
b.	If the plaintiff is a corporation				
	The plaintiff, (name)under the laws of the State of (name)	, is incorporated			
	and has its principal place of business in the	State of (name)			
	more than one plaintiff is named in the complaing providing the same information for each addi				
	The Defendant(s)				
The	e Defendant(s)				
The	e Defendant(s) If the defendant is an individual				
	If the defendant is an individual The defendant, (name)				
	If the defendant is an individual	Or is a citizen of			
	If the defendant is an individual The defendant, (name) the State of (name)	Or is a citizen of			
a.	If the defendant is an individual The defendant, (name) the State of (name) (foreign nation) If the defendant is a corporation The defendant, (name) incorporated under the laws of the State of	Or is a citizen of			
a.	If the defendant is an individual The defendant, (name) the State of (name) (foreign nation) If the defendant is a corporation The defendant, (name) incorporated under the laws of the State of, and has its pr business in the State of (name)	Or is a citizen of is (name) incipal place of Or is			
a.	If the defendant is an individual The defendant, (name) the State of (name) (foreign nation) If the defendant is a corporation The defendant, (name) incorporated under the laws of the State of, and has its pr	Or is a citizen of , is, is Or is Or is			

	3.	The Amount in Controversy
		The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain):
III.	Statement of	f Claim
	briefly as post relief sought, caused the ploof that involve and write a si	and plain statement of the claim. Do not make legal arguments. State as saible the facts showing that each plaintiff is entitled to the damages or other. State how each defendant was involved and what each defendant did that aintiff harm or violated the plaintiff's rights, including the dates and places wement or conduct. If more than one claim is asserted, number each claim hort and plain statement of each claim in a separate paragraph. Attach ges if needed.
	" Dec	attacheel"
IV.	Relief	
	order. Do not alleged are colaimed for the exemplary description.	and precisely what damages or other relief the plaintiff asks the court to of make legal arguments. Include any basis for claiming that the wrongs ontinuing at the present time. Include the amounts of any actual damages the acts alleged and the basis for these amounts. Include any punitive or amages claimed, the amounts, and the reasons you claim you are entitled to nitive money damages.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	address of the with the Clerk's Office may result in the distribution of my case.				
	Date of signing:	, 20 <u>/2</u> 4			
	Signature of Plaintiff Printed Name of Plaintiff	By Opde Tarasha Coumona SADE TANASHA CARILDNA) TeushEE		
В.	For Attorneys				
	Date of signing:	_, 20			
	Signature of Attorney				
	Printed Name of Attorney				
	Bar Number				
	Name of Law Firm				
	Address				
	Telephone Number				
	E-mail Address				